

Attachment 11
Proposal Statements and Questions

No.	RFP Section	Statement/Question	Page Limit
1	Not applicable	Identify and describe any regulatory action or sanction, including both monetary and non-monetary sanctions imposed by any federal or state regulatory entity against the DBPM's organization within the last five years. In addition, identify and describe any letter of deficiency issued, as well as any corrective actions required by any federal or state regulatory entity within the last five years that relate to Medicaid and CHIP contracts. Include the organization's parent company, affiliates, and subsidiaries in the response to this question.	Not applicable
2	IV.B Eligibility and Enrollment	Describe the DBPM's anticipated process to utilize the eligibility and enrollment files from MLTC or its designee to manage membership. Include the process for resolving discrepancies between these files and internal membership records.	1 page
3	IV.C Business Requirements	Describe the approach the DBPM will take to ensure compliance with all relevant provisions of Part 438 of Chapter 42 of the CFR, Title 471, 477, and 482 NAC.	Not applicable
4	IV.C Business Requirements	Include a copy of the COA from the Department of Insurance.	Not applicable
5	IV.C Business Requirements	Describe the DBPM's proposed approach for collaboration with other entities and programs, as required in Section IV.C.	3 pages
6	IV.C Business Requirements	Describe if any of the DBPM's Medicaid DBPMs are accredited by NCQA and, if not currently accredited in Nebraska, how it will attain accreditation for its Nebraska DBPM. Please describe any unsuccessful accreditation attempts in other states.	1 page
7	IV.C Business Requirements	If applicable, describe any restriction of coverage for counseling or referral services the DBPM is required to provide because of moral or religious obligation. Describe how the DBPM will provide members with access to those services.	1 page
8	IV.D Staffing Requirements	Describe the organization's number of employees, lines of business, and office locations. Submit an organizational chart showing the structure and lines of responsibility and authority in the company. Include the organization's parent organization, affiliates, and subsidiaries that will support this contract.	3 pages, excluding organizational chart

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9	IV.D Staffing Requirements	Provide an organizational chart for this contract, including but not limited to key staff and additional required staff. Label this "Nebraska Organizational Chart"	Not applicable
10	IV.D Staffing Requirements	In table format, indicate the proposed number of FTEs for each key staff and additional required staff for discrete time periods (no longer than 3 month intervals) from contract award through 6 months after the start date of operations and whether or not positions are located in Nebraska. Label this table "Proposed FTEs by Time Period."	Not applicable
11	IV.D Staffing Requirements	Provide job descriptions (including education and experience qualifications) of employees in key staff positions.	1 page per job description
12	IV.E. Covered Benefits and Services	Provide the DBPM's definition of medical necessity. Describe the process for developing and periodically reviewing and revising the definition. Describe the degree to which the definition is consistent with or differs from MLTC's definition of medically necessity per 471 NAC 1-002.02A.	3 pages
13	IV.E Covered Benefits and Services	Provide a description of the value-added services the DBPM proposes to offer to members. For each service: <ul style="list-style-type: none"> • Define and describe the service. • Note any limitations or restrictions that apply to the service. • Propose how and when members and providers will be notified of the service's availability. • Describe how a member may obtain/access the service. • Describe how the DBPM will identify the expanded benefit in administrative or encounter data. 	Not applicable
14	IV.E Covered Benefits and Services	Describe the DBPM's approach to member education and outreach regarding EPSDT, including any innovative mechanisms. Address the use of the DBPM's system for tracking each member's screening, diagnosis and treatment to ensure services are delivered within the established timeframes.	4 pages

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15	IV.G Member Services and Education	<p>Describe member services processes including:</p> <ul style="list-style-type: none"> • Training of customer service staff (both initial and ongoing). • Routing calls to appropriate persons, including escalation. • Making information available to customer service staff (the type of information and how it is provided, e.g. hard copy or on-line search capacity). • Handling calls from members with limited English proficiency and persons who are hearing impaired. • Monitoring and ensuring the quality and accuracy of information provided to members. • Monitoring and ensuring adherence to performance standards. • How MSRs will interact with other organizations including MLTC and other programs/social service entities (e.g., WIC, housing assistance, and homeless shelters). • After hours procedures. 	6 pages
16	IV.G Member Services and Education	Describe the informational materials the DBPM proposes to send to new members.	2 pages
17	IV.G Member Services and Education	Describe the approach the DBPM will take to provide members with written material that is easily understood, including alternate formats and other languages. Address how the DBPM will ensure that materials are at the appropriate reading level.	2 pages
18	IV.G Member Services and Education	Provide an overview of the DBPM's proposed member website, including how it will satisfy requirements in this RFP. Provide examples of information that will be available on the website and on portals for members.	6 pages
19	IV.G Member Services and Education	Discuss the DBPM's approach to welcoming new members, addressing requirements listed in the RFP. Discuss any proposed alternate methods or plans the DBPM would use to effectively welcome members.	3 pages
20	IV.G Member Services and Education	Detail the strategies the DBPM will use to influence member behavior to access health care resources appropriately and adopt healthier lifestyles.	5 pages

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21	IV.G Member Services and Education	<p>Describe proposed member education content and materials and attach examples used with Medicaid or CHIP populations in other states. Describe innovative methods the DBPM has used for member education.</p> <p>Describe how the DBPM will provide equitable member education throughout the State. Provide examples and descriptions of how member education will be used to improve service coordination including:</p> <ul style="list-style-type: none"> • The use of technological tools, including social media and mobile technology. • Partnership with community-based organizations for education and outreach. 	10 pages
22	IV.H Grievances and Appeals	<p>Provide a flowchart and comprehensive written description of the DBPM's member grievance and appeals process, including the approach for meeting the general requirements and plan to:</p> <ul style="list-style-type: none"> • Ensure individuals who make decisions about grievances and appeals have the appropriate expertise and were not involved in any previous level of review. • Ensure an expedited process exists when taking the standard time could seriously jeopardize the member's health. As part of this process, explain how the DBPM will determine when the expedited process is necessary. • Use data from the grievance and appeals system to improve the DBPM's operational performance. 	3 pages
23	IV.H Grievances and Appeals	<p>Describe the approach the DBPM will take to provide members with grievance, appeal, and State fair hearing information. Address how the DBPM will ensure the grievance and appeals system policies and procedures, and all notices, will be available in the member's primary language and that reasonable assistance will be given to members to file a grievance or appeal.</p>	2 pages

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24	IV.I Provider Network Requirements	<p>Describe the DBPM's proposed provider network outreach approach and recruitment strategy. Provide a detailed work plan for developing an adequate network within the timeframe described in Section IV.I. Describe the method the DBPM plans to use on an ongoing basis to assess and ensure that MLTC's network standards are maintained, including standards related to:</p> <ul style="list-style-type: none"> Distance. Appointment access. Cultural competency. 	6 pages, excluding plan for developing an adequate network
25	IV.I Provider Network Requirements	<p>Provide a comprehensive discussion of the DBPM's approach to maximizing the number of members participating in a Dental Home, including:</p> <ul style="list-style-type: none"> The strategy the DBPM will use initially, and on an ongoing basis, to ensure Dental Home participation. Examples of successful strategies and lessons learned in encouraging Dental Home participation. 	
26	IV.I Provider Network Requirements	Describe the DBPM's required Dental Home responsibilities and how the DBPM will verify Dental Home providers are performing them.	2 pages
27	IV.I Provider Network Requirements	<p>Describe innovative strategies the DBPM's intends to use to identify specialty types for which member access is limited. Describe the DBPM's intended initiatives for increasing the number of specialists within those specialty types that participate in the DBPM's network.</p> <p>Identify potential challenges the DBPM anticipates in ensuring members receive appropriate care for specialties where access concerns exist, and explain how the DBPM will mitigate those challenges.</p>	3 pages
28	IV.I Provider Network Requirements	Describe the DBPM's process for monitoring and ensuring adherence to MLTC's requirements regarding appointment availability and wait times.	2 pages

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29	IV.I Provider Network Requirements	<p>Describe the DBPM's approach to promoting and facilitating the capacity of its providers to provide:</p> <ul style="list-style-type: none"> • Patient-centered care. • Improved health outcomes. • Member compliance. • Member satisfaction. <p>Discuss the DBPM's successes with patient- centeredness in other Medicaid programs, what lessons have been learned, and the DBPM's planned approach in Nebraska.</p>	3 pages
30	IV.I Provider Network Requirements	<p>Describe how the DBPM would respond to the network termination or loss of a large-scale provider group. Take the following areas into consideration in the response:</p> <ul style="list-style-type: none"> • Notification to MLTC. • The automated systems and membership supports used to assist affected members with provider transitions. • Systems and policies used for continuity of care of members experiencing provider transitions. • Impact if the loss is in a geographic area where other providers of the same provider type are not available and the DBPM's response to that impact. 	3 pages
31	IV.I Provider Network Requirements	<p>Describe the DBPM's credentialing and re-credentialing process including:</p> <ul style="list-style-type: none"> • Ensuring that providers are enrolled in Medicaid and have a valid identification number. • Obtaining information on ownership and control. • Identifying excluded providers and persons convicted of crimes searches. • Using quality and utilization measures in the recredentialing process. 	3 pages

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32	IV.I Provider Network Requirements	Explain the process the DBPM will put in place to maintain the provider file with detailed information on each provider sufficient to support provider payment, including issuance of IRS 1099 forms, meeting all federal and MLTC reporting requirements, and cross referencing State and Federal identification numbers to ensure excluded providers are identified.	2 pages
33	IV.J Provider Services	<p>Describe the DBPM's Provider Services toll-free telephone line, including:</p> <ul style="list-style-type: none"> • How the DBPM will provide a fully-staffed line between the hours of 7:00 a.m. and 7:00 p.m. CST. Monday through Friday, to address non-emergency issues. • How the DBPM will ensure that provider calls are acknowledged and resolved within three business days of receipt. • The location of operations, and if out of state, describe how the DBPM will accommodate services for Nebraska. • How the DBPM will measure and monitor the accuracy of responses provided by call center staff, as well as caller satisfaction. 	3 pages
34	IV.J Provider Services	<p>Provide an overview of the DBPM's proposed provider website, including examples of information that will be available on the website and on portals for providers.</p> <p>Include proposed resources and tools that will be of use to providers. Please provide a description of technology that will be used to enhance the provider website.</p>	5 pages excluding sample resources, tools and materials

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35	IV.J Provider Services	<p>Describe the DBPM's proposed provider education and training program, including</p> <ul style="list-style-type: none"> • A description of the training program. • A work plan that outlines education and training activities, including frequency of office visits to conduct activities. • A listing of the types of materials and content the DBPM will distribute (include three samples of materials). • How the DBPM will evaluate usefulness of educational sessions and utilize feedback to influence future training sessions. 	5 pages, excluding sample materials
36	IV.J Provider Services	<p>Provide a description of the DBPM's proposed approach to handling provider complaints. Include intended interaction and correspondence, as well as timeframes in which the DBPM will acknowledge and resolve inquiries and grievances. Explain how the DBPM will track provider complaints and how the DBPM will use this type of information to improve provider services. Include a description of any type of internal reporting the DBPM will perform, and how the DBPM will use reporting information to influence the activities of the DBPM's provider services representatives.</p>	3 pages
37	IV.J Provider Services	<p>Describe the approach the DBPM will take to assess provider satisfaction, including tools the DBPM plans to use, frequency of assessment, and responsible parties. Provide relevant examples of how the DBPM has utilized survey results to implement quality improvements in similar programs and how these changes have improved outcomes.</p>	5 pages

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38	IV.K Subcontracting Requirements	<p>For each subcontractor included in the proposal, provide the organization's role in this project, corporate background, size, resources and details addressing the following:</p> <ul style="list-style-type: none"> • The date the company was formed, established or created. • Ownership structure (whether public, partnership, subsidiary, or specified other). • Organizational chart. • Total number of employees. • Whether the subcontractor is currently providing services for the DBPM in other states and the subcontractor's location. 	1 page per subcontracting organization
39	IV.K Subcontracting Requirements	<p>For subcontracted roles included in the proposal, describe the DBPM's process for monitoring and evaluating performance and compliance, including but not limited to how the DBPM will:</p> <ul style="list-style-type: none"> • Ensure receipt of all required data including encounter data. • Ensure that utilization of health care services is at an appropriate level. • Ensure delivery of administrative and health care services at an acceptable or higher level of care to meet all standards required by this RFP. • Ensure adherence to required grievance policies and procedures. 	8 pages
40	IV.L Care Coordination	Describe how the DBPM will assist members to identify and gain access to community resources that provide services the Medicaid program does not cover.	2 pages

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41	IV.M Quality Management	<p>Provide a description of the DBPM's proposed QAPI program. Include the following in the description:</p> <ul style="list-style-type: none"> • The proposed structure, and policies and procedures that explain the accountability of each organizational unit. • The program's infrastructure, including coordination with subcontractors and corporate entities, if applicable. • Proposed QAPI committee membership and committee responsibilities. • How focus areas will be selected, including how data will be used in the selection process. • The proposed QAPI work plan, including planned initiatives. 	10 pages
42	IV.M Quality Management	Describe experience in using results of performance measures, member satisfaction surveys, and other data to drive improvements and positive affect the health care status of members. Provide examples of changes implemented to improve the program and members' health outcomes.	5 pages
43	IV.M Quality Management	Describe the DBPM's process for soliciting feedback and recommendations from key stakeholders, members, and families/caregivers, and using the feedback to improve the DBPM's quality of care.	2 pages
44	IV.M Quality Management	Describe the DBPM's proposed methodology to identify, design, implement, and evaluate PIPs. Provide examples of PIPs conducted by the DBPM, and how operations improved because of their results.	3 pages
45	IV.M Quality Management	Discuss the DBPM's approaches to annual member satisfaction surveys. Provide relevant examples of how the DBPM has utilized survey results to implement quality improvements in similar programs and how these changes have improved outcomes.	1 page

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46	IV.M Quality Management	<p>Describe the DBPM's practice of profiling the quality of care delivered by dental providers, including the methodology for determining which and how many providers will be profiled.</p> <ul style="list-style-type: none"> • Submit sample quality reports. • Describe the rationale for selected the measures that are gathered/reported. • Describe the proposed frequency of profiling activities. 	3 pages, excluding sample quality reports
47	IV.M Quality Management	Describe the information the DBPM will provide to members and providers about the QAPI program.	2 pages
48	IV.N Utilization Management	<p>Describe the DBPM's approach to utilization management, including:</p> <ul style="list-style-type: none"> • Innovations and automation the DBPM will use for its UM program. • Accountability for developing, implementing, and monitoring compliance with utilization policies and procedures, and consistent application of criteria by individual clinical reviewers. • Mechanisms to detect and document over- and under-utilization of dental services. • Processes and resources used to develop and regularly review utilization review criteria. • How the DBPM will use its UM Committee to support UM activities. 	5 pages
49	IV.N Utilization Management	Describe the process the DBPM will have in place to determine appropriate practice guidelines notify providers of new practice guidelines, and monitor implementation of those guidelines.	2 pages

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50	IV.N Utilization Management	<p>Describe the DBPM's proposed approach to prior authorization, including:</p> <ul style="list-style-type: none"> The data sources and processes to determine which services require prior authorization, and how often these requirements will be reevaluated. Describe what will be considered in the reevaluation of need for current prior authorization requirements. The proposed prior authorization processes for members requiring services from non-participating providers and expedited prior authorization. The DBPM's process for notifying providers either verbally or in writing, and the member in writing, of denials or decisions to authorize services in amount duration or scope that is less than requested. 	4 pages
51	IV.N Utilization Management	Provide a listing of services for which the DBPM will require prior authorization and describe how the DBPM will communicate this information, as well as the results of authorization decisions, to providers and members.	2 pages excluding the listing of services
52	IV.N Utilization Management	Describe how the DBPM will ensure members receive written and timely notice of action relating to adverse actions taken by the DBPM.	1 page
53	IV.N Utilization Management	Describe the DBPM's process for conducting retrospective reviews to examine trends, issues, and problems in utilization.	2 pages
54	IV.N Utilization Management	Describe the DBPM's methodology to assess disparities in treatment among races and ethnic groups and correct those disparities.	2 pages
55	IV.O Program Integrity	Describe the DBPM's approach for meeting the Program Integrity requirements described in the RFP, including but not limited to a compliance plan for the prevention, detection, reporting, and implementation of corrective actions for suspected cases of FWA and erroneous payments. Include best practices the DBPM has utilized in other states.	4 pages
56	IV.O Program Integrity	Describe how the DBPM currently works with other entities that investigate and prosecute provider and member fraud, waste, and abuse. How will the DBPM apply methods in Nebraska?	2 pages

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57	IV.O Program Integrity	Currently, how does the DBPM educate members and providers to prevent fraud, waste, abuse, and erroneous payments? How will the DBPM apply methods in Nebraska?	3 pages
58	IV.O Program Integrity	Describe the DBPM's method and process for capturing TPL and payment information from its claims system. Explain how the DBPM will use this information.	3 pages
59	IV.Q Provider Reimbursement	Describe the DBPM's approach to ensuring that out of network prior authorization and payment issues are resolved expeditiously in instances when the DBPM is unable to provide necessary services to a member within its network.	2 pages
60	IV.S Systems and Technical Requirements	Provide a general system description that details how each component of the DBPM's health information system will support the major functional areas of the DBP. Include a systems diagram that highlights each system component, including subcontractor components, and the interfacing or supporting systems used to ensure compliance with RFP requirements. Describe how the DBPM's system will share information between Nebraska's systems and its own system to avoid duplication of effort. Identify any requirements that cannot be met without custom modifications or updates to the DBPM's systems. If modifications or updates are required, describe them and the DBPM's plan for completion prior to program operations.	12 pages, not including the systems diagram
61	IV.S Systems and Technical Requirements	Provide a description of how the DBPM will comply with applicable Federal (including but not limited to HIPAA) standards for information exchange, and ensure adequate system access management and information accessibility. Affirm the DBPM's use of HIPAA-compliant files and transaction standards. Include the process for resolving discrepancies between member eligibility files and the DBPM's internal membership records, including differences in members' addresses.	3 pages

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62	IV.S Systems and Technical Requirements	Describe the DBPM's approach to monitoring system availability issues and the resolution process. Provide a description of the DBPM's system help desk. Include the DBPM's process for ensuring that recurring problems, not specific to system unavailability, are identified and reported to DBPM management within one business day of recognition and are promptly corrected.	2 pages
63	IV.S Systems and Technical Requirements	<p>Provide a description of the DBPM's eligibility and enrollment database. Include a description of how the DBPM will:</p> <ul style="list-style-type: none"> • Complete updates within the timeframes specified in the contract. • Identify members across multiple populations and systems. • Monitor, track, and resolve any discrepancies between the enrollment files and the DBPM's system (e.g., duplication of records and information mismatches). 	2 pages
64	IV.S Systems and Technical Requirements	Provide a description of the DBPM's information security management functions. Include a description of proposed access restrictions for various hierarchical levels, controls for managing information integrity, audit trails, and physical safeguards of data processing facilities.	3 pages

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65	IV.S Systems and Technical Requirements	<p>Describe the DBPM's business continuity, contingency, and recovery planning. Attach a copy of the DBPM's plan, or summarize how the plan addresses the following aspects of emergency preparedness and disaster recovery:</p> <ul style="list-style-type: none"> • Operational and system redundancy in place to reduce the risk of down-time. • System and operational back-up sites. • Contingency and recovery planning including resumption of operations. • Prioritized business functions for resumption of operations and responsible key personnel. • Employee and supplier preparedness, including a plan for training and communication to employees and suppliers and identified responsibilities of key personnel, in the event communications are unavailable. • Approach to provider preparedness for continuity of member care and assurance of payment for services rendered in good faith. • Testing approach and regular schedule to improve and update the plan over time. 	3 pages, excluding sample plan
66	IV.R Claims Management	<p>Describe the DBPM's strategies for ensuring its claim processing is ready at the time of contract implementation, to ensure timely accurate claims processing. Include the DBPM's strategy for identifying problem areas, and how the DBPM will ensure rapid response.</p>	2 pages
67	IV.R Claims Management	<p>Describe the DBPM's methodology for ensuring that claims payment accuracy standards will be achieved. At a minimum, address:</p> <ul style="list-style-type: none"> • The process for auditing claims samples. • Documentation of the results of these audits. • The processes for implementing any necessary corrective actions resulting from the audit. 	3 pages
68	IV.R Claims Management	<p>Describe in detail how the DBPM will verify that services were actually provided including:</p> <ul style="list-style-type: none"> • Minimum sampling criteria to ensure a representative sample. • How results of monitoring will be reported to the State quarterly. 	3 pages

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69	IV.R Claims Management	Describe the DBPM's approach for ensuring encounter data is submitted accurately and timely to MLTC, consistent with required formats. Include in the response how the DBPM proposes to monitor data completeness and manage the non-submission of encounter data by a provider or subcontractor.	5 pages
70	IV.T Reporting and Deliverables	Provide an example of dashboards that the DBPM will use to track DBPM performance for DBPM leadership and the QAPI Committee.	Not applicable
71	IV.T Reporting and Deliverables	Provide examples of the following reports: <ul style="list-style-type: none"> • Member Grievance System • Performance Improvement Projects How will the DBPM use required reports in its day to day management and operations?	Not applicable
72	IV.F FFS Claims Management and Processing	Provide a detailed description of the DBPM's approach to implementing the necessary functionality to support FFS claims processing.	Not applicable
73	IV.F FFS Claims Management and Processing	Describe the level of effort necessary to support Nebraska program and policy changes, including but not limited to new covered services, prior authorization requirements, or additional populations.	Not applicable
74	IV.F FFS Claims Management and Processing	Describe how the DBPM will maintain a distinction between FFS and managed care processing rules, claims transactions, providers, members and prior authorizations within the system.	Not applicable
75	IV.F FFS Claims Management and Processing	Provide an explanation of the DBPM's plan and approach for business operations to support the FFS volume vs. the risk-based volume. Will the plan have separate or joint business operations units for some or all processes?	Not applicable
76	IV.F FFS Claims Management and Processing	Provide an explanation of the significant risks associated with the implementation and ongoing operation of claims broker services, and provide mitigation strategies for those risks.	Not applicable
77	IV.F FFS Claims Management and Processing	Provide a timeline for implementation of claims broker functionality, including the number of months that it will take to pay FFS claims.	Not applicable

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78	IV.V Transition and Implementation	<p>Provide a preliminary implementation plan that describes the DBPM's plan to comply with all the major areas of the contract including:</p> <ul style="list-style-type: none">• Member services• Network development and management• Provider education• Quality management, including credentialing• Utilization management• Transition and care coordination• Information systems management• Claims management• Grievances and appeals	Not applicable